

Connecticut Department of Public Health Drug Overdose Monthly Report

Fatal Unintentional and Undetermined Intent Drug Overdose Report

Key Findings of Drug Overdose Decedents, 2019 – February 2023*

- Current monthly report is based on confirmed fatal drug overdose cases from 2019 to February 2023. Data from 2022 and early 2023 data are preliminary and may change due to pending cases. Period of analysis includes January 2019 through January 2023.
- 2023* data overview: As of the 2nd week of February there were 102 deaths for 2023, with 76 in January and 26 in February. Approximately 86.3% of these deaths involved fentanyl. Data are subject to change because of pending cases.
- 2022* data overview: From January to December 2022, there were 1,462 confirmed fatal drug overdoses. The percentages of different substances involved in fatal overdoses are as follows: any opioid (Illicit/prescription) 92%, fentanyl 85.4% (N=1,248), xylazine 24.7% (N=353) and Gabapentin 11.4% (N=166). Percentages are based on total number of cases.
- Comparison between 2020-2022: There were 1,531 confirmed deaths for 2021 with an increase of 11.4% compared to the previous year, 2020 (N=1,374). Preliminary data from 2022 suggests a decrease in drug overdose deaths by 4.7%, compared to 2021.
- **Demographic data for 2022*:** Males had a higher mortality rate than females in 2022 (58.2 vs. 20.9 per 100,000 population, respectively). In 2022, the mortality rate was highest for non-Hispanic Black population and for 35–44-year-olds.
- Place of death in 2021 and 2022: The majority of the decedents died at a residence (either their own or someone else's) in 2021 (60%) and 2022 (63%).
- **Fentanyl-involved drug overdose deaths:** The average percentage of fentanyl- or fentanyl analog-involved deaths was 85% for 2020, 2021 and 2022, compared to 82% in 2019.
- **Xylazine, an animal tranquilizer, in drug overdose deaths:** For the first time in 2019, xylazine/fentanyl combinations were found to be involved in drug overdoses (N=71). The same lethal combination continued to be a problem in 2020 (N=141), 2021 (N=295), 2022 (N=353) and in preliminary data of 2023. There were 18 deaths involving xylazine/fentanyl combinations in January (N=10) and February (N=8) of 2023.
- New and emerging substances: Para-fluorofentanyl, a fentanyl analog, emerged in 2020 and was present in 13 overdose deaths that year, 94 in 2021, 32 in 2022, and 3 in 2023. The Injury and Violence Surveillance Unit (IVSU) from the Department of Public Health (DPH) continues to monitor for other new emerging substances which include but are not limited to Flualprazolam (benzodiazepine family) and the Nitazene family of substances (novel synthetic opioids).

*Data subject to change because of the pending cases.

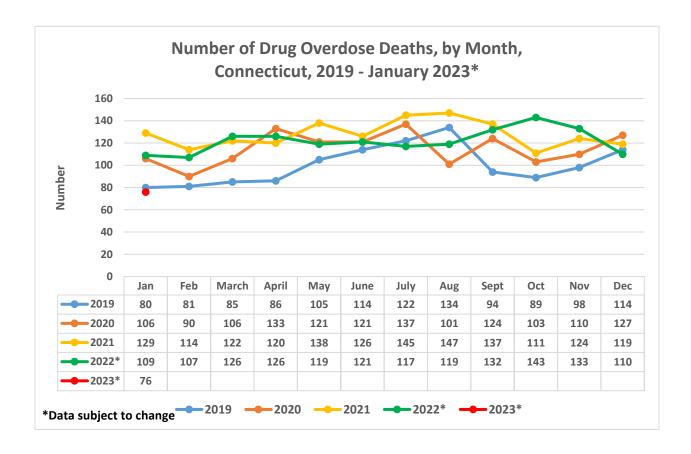
Updated on 3-15-2023; Data Source: Connecticut Office of the Chief Medical Examiner (OCME), per CDC-SUDORS grant guidelines.

For substance use disorder information visit: https://www.drugfreect.org.

For information on the CT DPH Opioids and Prescription Drug Overdose Prevention Program in the Office of Injury and Violence Prevention, visit: https://www.ct.gov/dph/injuryprevention.

Unintentional and undetermined drug overdose deaths, by month, Connecticut,

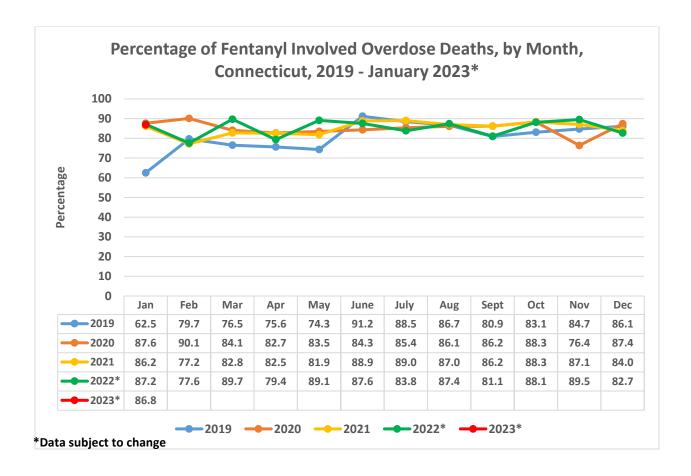
2019 – January 2023*. Compared to 2020, there was an increase of 11.4% in 2021 for unintentional and undetermined drug overdose deaths in Connecticut. However, preliminary data for 2022 suggest a decrease of 4.7% in drug overdose deaths, compared to the previous year of 2021. The chart below represents the monthly count of confirmed drug overdose deaths from January 2019-January 2023*. Year 2022 and January 2023 numbers may change due to the processing of pending cases.



The percentage of fentanyl-involved overdose deaths continues to be a problem in 2023*.

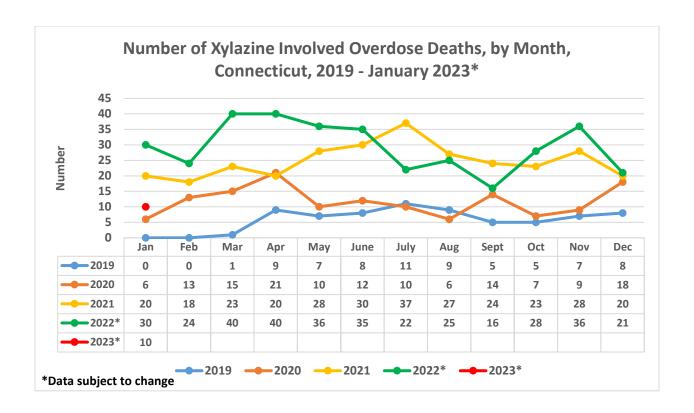
Fentanyl-involved overdose deaths increased significantly in 2019 to 82%, compared to the previous years of 2015 to 2018. For 2020 and 2021, the average percentage of fentanyl-involved deaths was 85%. For 2022, the percentage of fentanyl-involved deaths remains high; 87.2% in January, 77.6% in February, 89.7% in March, 79.4% in April, 89.1% in May, 87.6% in June, 83.8% in July, 87.4% in August, 81.1% in September, 88.1% in October, 89.5% in November and 82.7% in December with an average of 85.4% in 2022. In January of 2023, 86.8% of deaths were involved

with fentanyl. The chart below represents the percentage of fentanyl-involved deaths by month during January 2019- January 2023*.



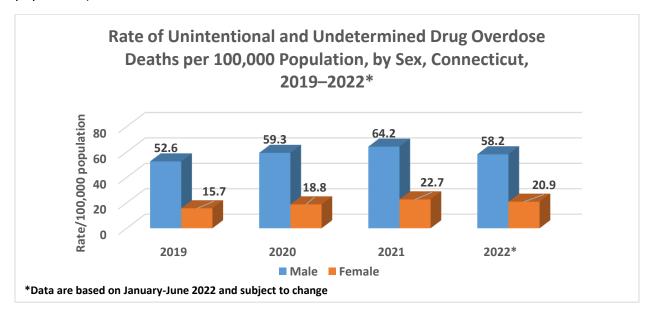
Xylazine involved drug intoxication deaths in Connecticut, 2019 – January 2023*.

To enhance drug effects, recreational drugs are often adulterated with other pharmacological agents such as xylazine, a veterinary sedative not intended for human use. In Connecticut, in March 2019, xylazine was identified as a novel and emerging adulterant in fatal drug intoxications when combined with fentanyl. It continues to be a problem in 2023. There were 71 xylazine-involved deaths in 2019, 141 in 2020 and 295 in 2021. Xylazine-involved drug overdose deaths continue to be high in 2022, with 30 deaths in January, 24 in February, 40 in March, 40 in April, 36 in May, 35 in June, 22 in July, 25 in August, 16 in September, 28 in October, 36 in November and 21 in December with an overall total of 353. As per preliminary data from 2023, there were 10 xylazine involved deaths in January. Numbers from 2022 and 2023 may increase due to the processing of pending cases. The below chart represents the number of xylazine involved deaths from January 2019-January 2023*.



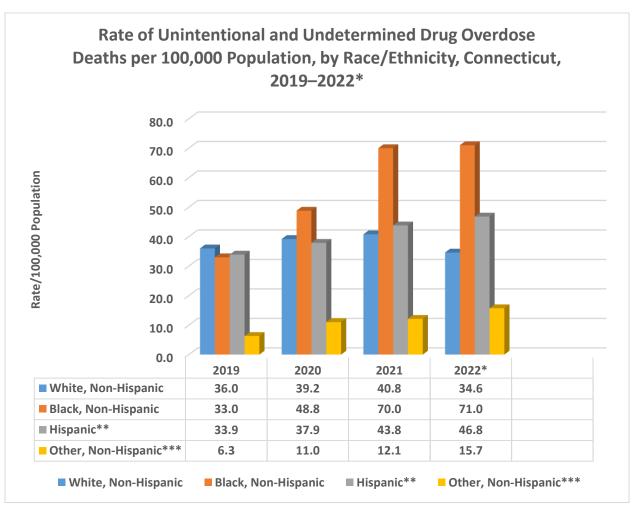
Drug overdose death rates were higher in males compared to females for 2019 to 2022*.

Rates of unintentional and undetermined drug overdose-related deaths were consistently higher among males when compared to females. The bar graph below represents rates of unintentional and undetermined drug overdose death by sex (rate per 100,000 sex-specific population) between 2019 to 2022*.



Drug overdose death rates were higher among the non-Hispanic Black and Hispanic populations compared to the non-Hispanic White population.

Drug overdose death rates were highest among non-Hispanic Whites followed by the Hispanic population in 2019. However, from 2020 to 2022*, the drug overdose mortality rate substantially increased in the non-Hispanic Black and Hispanic populations compared to 2019. The graph below represents the unintentional and undetermined drug overdose mortality rate in Connecticut, by race/ethnicity for years 2019-2022*.



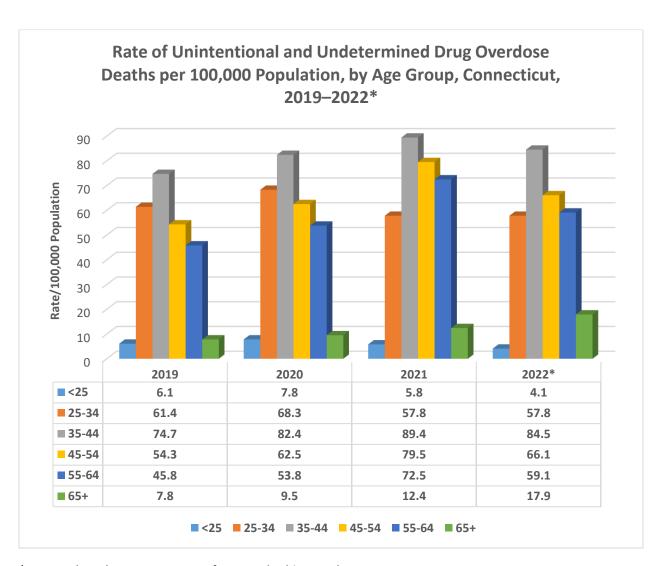
^{*}Data are based on January-June 2022 and subject to change

^{**} All races of Hispanic population.

^{***}Other includes American Indian or Alaska Native, Asian or Pacific Islander or Unknown population

Drug overdose death rates were highest in the 35-44-year-old age group in Connecticut, 2019 – 2022*.

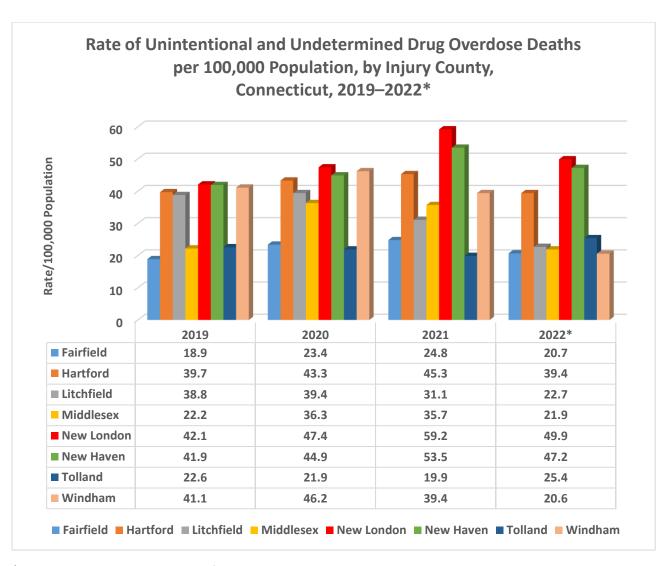
Drug overdose death rates were calculated per 100,000 age-specific population and were highest among the 35–44-year age group, followed by 45-54 and 55-64-year age groups in 2021 and 2022. The graph below represents the unintentional and undetermined drug overdose mortality rate in Connecticut, by age, by year for 2019-2022*.



^{*}Data are based on January-June of 2022 and subject to change

Drug overdose death rates in Connecticut, by Injury County, 2019 - 2022*

The graph below represents the unintentional and undetermined drug overdose mortality rate in Connecticut, by injury county, for 2019, 2020, 2021 and 2022*. Year 2022 rates are calculated based on January-June data and the data is subjected to change. Preliminary data suggests that drug overdose death rates have decreased across the counties for 2022 compared to 2021. However, Tolland County has seen an increase from 19.9 in 2021 to 25.4 in 2022*.



^{*}Data are based on January - June of 2022 and subject to change